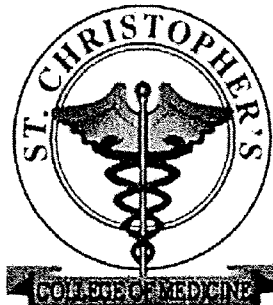


# **EXHIBIT 25**

## St Christophers College of Medicine Application

Page 1 of 1

St. Christopher's College of  
Medicine  
Office of the Registrar  
P. O. Box 1199  
Melville, NY 11747  
1-888-728-0100  
Fax 1-877-229-1420



St. C



It is imperative that this is typed or written in small, clear block letters.

Family Name KATZ First name RICHARD Middle name DENIS  
 Soc. Sec./NMS No. \_\_\_\_\_ Date of Birth \_\_\_\_\_ Citizenship U.S.A  
 Street address 90-50 Union Tpke. 1st fl. City, State & Zip code Glendale, NY 11385  
 Telephone No. (718) 844-2455 E-mail Address cat2400@hotmail.com Male/Female Male  
 Spouse name \_\_\_\_\_ Address \_\_\_\_\_ Telephone \_\_\_\_\_  
 Emergency contact name/relationship Kathleen Katz / mother Address RD #3 Box 3096 E Shore Rd. Telephone (516) 476-8842  
 Father's name IRWIN KATZ Address RD #3 Box 3096 E Shore Rd. Telephone/Profession (516) 476-8842 / Production Mgr.  
 Mother's name KATHLEEN KATZ Address \_\_\_\_\_ Telephone/Profession (516) 476-8842 / Salesperson  
 High School/Secondary H.S. of Art & Design Address NYC, NY Diploma/Major H.S. Diploma  
 College Parsons School of Design Address NYC, NY Major/Degree dates B.F.A. / ILLUSTRATION  
 College SUNY College at Old Westbury Address Old Westbury, NY Major/Degree dates Post Bacc / Pre-Med  
 Advanced Degree \_\_\_\_\_ License held \_\_\_\_\_ Admission date requested \_\_\_\_\_  
 Medical School attended St. Michael's Sch. Med Dates 01/99 - present Reason for leaving As per St. Chris Student Recommendation  
 Advanced standing basis \_\_\_\_\_ Preclinical terms completed \_\_\_\_\_ Clinical rotations completed \_\_\_\_\_  
 Employment & Experience (use separate paper if necessary) see CV  
 Have you a health problem of any kind? No Are you currently under the care of a physician? No  
 Have you ever been convicted of a crime or felony? No  
 If yes, please explain \_\_\_\_\_

I understand that St. Christopher's College of Medicine reserves the right to accept or deny any applicant.

I hereby state all information here is true and that I / ( RICHARD KATZ ) am/is responsible for paying all my fees. I will conform to all the terms and conditions pertinent to being a student/graduate at this school. Any applicant providing St. Christopher's College of Medicine with any incorrect or misleading information, will be denied admission, be dismissed, or any degree nullified at any future time.

Please enclose the following along with your completed application: four recent passport-style photographs, two letters of recommendation, a brief autobiography and personal essay on medical career expectations typed or printed, a Curriculum Vitae, official transcripts from undergraduate and/or graduate colleges, official MCAT scores if taken and a non-refundable application fee of \$100.00.

Signature [Signature] Date 10/26/01  
 This application will not be processed without the \$100.00 application fee.

St Christopher's 001

90-50 UNION TPKE. SUITE 18H • GLENDALE, NY 11385  
PHONE (718) 849-2455 • E-MAIL CAT2400@MSN.COM

## RICHARD KATZ

### EDUCATION

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1999 – present St. Matthew's University School of Medicine [Belize, CA]  
*M.D. Candidate*

1999 – present ST. Joseph's College of Maine. [Standish, Me.]  
*MHCAS Candidate*

Aug. 1994 – May 1997 SUNY College at Old Westbury [Westbury, N.Y.]  
*Post Graduate Medical Prerequisites*

Aug. 1988- May 1992 Parsons School of Design [New York, N.Y.]  
*Bachelor of Fine Arts*

### PROFESSIONAL EXPERIENCE

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1998-1999 Elmhurst Hospital Center. [Elmhurst, N.Y.]

Department of Psychiatry/Nursing

*Psychiatric Care Associate (Case Worker)*

Performed therapeutic and related health service activities for an age specific psychiatric population. Interacted with patients in daily living activities ensuring a properly maintained physical, social and clinical environment. Applied casework approaches including home visits to evaluate patient needs, assisted with patient referrals and worked with families on related social, economic and health problems. Developed and Piloted group therapy protocols tailored to this specific population. Established and maintained therapeutic relationships with assigned patients while assisting with the maintenance of the therapeutic milieu. Communicated patient progress to the interdisciplinary treatment team by way of written and verbal reports. Participated in planning and implementing an orientation program for new patients. Gathered information for intake, social histories, referrals that would augment the understanding of cases. Encouraged patient involvement in various individual and group activities as part of planned treatment programs.

1991-1998 Elmhurst Hospital Center. [Elmhurst, N.Y.]

Department of Emergency Medicine

*Clerical Associate Level III*

*Registration Functions:*

Interviewed patients and family members to obtain billing and demographic information; opened and closed emergency department visits; booked clinical referrals, processed Managed Care information for authorization.

*Nursing Station Functions:*

Prepared patient specimens for transmittal to laboratories for testing. Responsible for receiving reports of abnormal test results from technician in lab.

St Christopher's 002

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